



MEDICAL BOARD OF CALIFORNIA

Central Complaint Unit



Security Agreement - Accessing the Licensing Verification System

This request is for the authorization of access and use of information maintained within the Medical Board of California's Information System. The Medical Board of California will herein after be referred to as the "Board".

Name of Organization:			
Department:			
Street Address:			
City:		State:	Zip Code:
Full Name of Responsible User:		E-mail Address:	
Telephone Number:		Ext:	FAX Number:
New User	Yes	No	If No, Enter User ID/Password ➡

Organization and Responsible User Agreement

The above named Organization and Responsible User agree that information obtained from the Board's Licensing Verification System is for official use only and shall not sell or otherwise disclose to any third party. The Organization and Responsible User further agree to use all precautions to assure that the information is held in strict confidence, not disclosed to any unauthorized person(s) and/or used in an unauthorized manner.

LVS users will not be permitted to exceed 9,500 queries per calendar month without prior approval from the Board. Individuals using LVS in excess of their authority are subject to monitoring by system personnel. All http and FTP accesses are logged and monitored. LVS users who exceed the 9,500 limit will have their access denied. Anyone using this system expressly consents to such monitoring and is advised that if such monitoring reveals possible evidence of criminal activity, further legal action may be taken.

The Organization and Responsible User agree to comply with this Security Agreement as a condition for accessing the Board's Licensing Verification System or associated systems and are legally bound by this document. Failure to fully comply with these policies and requirements will result in the denial of access. The Organization and Responsible User understand that any illegal use of the Board's Licensing Verification System or associated systems is punishable as a public offense under California Penal Code Section 502.

By signature, of the Responsible User to this document and the Manager of the Organization certify under penalty of perjury under the laws of the State of California that they have read, understand and agree to the statements made in this Security Agreement.

Signature Block

Manager of Organization ➡	Printed Name:	Signature:	Date:
Responsible User ➡	Printed Name :	Signature:	Date:
Medical Board of CA ➡	Approved By: LVS Security Administrator	Date:	